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The Company of Clinton Square P.O. Box 31051 Rochester, NY 14603 (Depositor's name 1 No return to APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 10:053.460 CONFIRMATION NO 01/18/2002 Norbert Moszner TITLE OF INVENTION: DENTAL MATERIALS BASED ON METAL OXIDE CLUSTERS 20959/1661 (P 58792) APPLN, TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUF nonprovisional NO DATE DUE \$1400 \$300 \$1700 09/20/2006 EXAMINER ART UNIT CLASS-SUBCLASS ZIMMER, MARC S 1712 528-240000 Change of correspondence address or indication of "Fee Address" (37 FR 1.363). 2. For printing on the patent front page, list Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (1) the names of up to 3 registered patent attorneys Nixon Peabody LLP or agents OR, alternatively, ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Ivoclar Vivadent AG Schaan, Liechtenstein Please check the appropriate assignce category or categories (will not be printed on the patent) : 🔘 Individual 🔯 Corporation or other private group entity 🔘 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): 🛭 Issue Fee A check in the amount of the fee(s) is enclosed. XI Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized by change the required fee(s), or credit any overpayment, to Deposit Account Number 14-1138 (enclose an extra copy of this form). Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USFIO is requested to apply the Issue Fee and Publication Fee (if any) or to reapply any previously paid usue fee to the application identified above.

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